REMARKS

Reconsideration of this application is respectfully requested. This amendment should be entered because it makes an minor clarifying change to claims 19 and 25 that make clear that the threshold may be exceeded or fallen below. These changes should not affect the issue of patentability. The amendment places this application in better condition for allowance and for an appeal, if needed.

The rejection of claims 19 to 24 as being obvious over Kitaevich et al (US Patent 6,471,872) is traversed. Kitaevich et al do not disclose a controller obtaining a baseline feedback signal "during an initial phase of blood filtration treatment", storing a baseline signal or using a baseline signal to determine a threshold signal. Rather, Kitaevich et al, col. 3, lns. 63-67, disclose threshold levels selected by a human operator. Accordingly, Kitaevich et al teach away from determining a threshold level based on a baseline feedback signal and from obtaining the basline signal during an initial phase of treatment.

Contrary to the Action at page 3, Kitaevich et al do not suggest obtaining a baseline feedback signal during initial treatment or using such a baseline signal to set a threshold. In particular, the sections of Kitaevich cited the Action do not address a baseline feedback signal:

(i) at col. 8 line 60 to col 9 line 6 Kitaevich teaches a manual mode of pumping rates in which the controller applies "fixed voltages" to the pumps and an automatic mode wherein a "desired hemofilration amount or rate [is] programmed into the controller." There is no suggestion of a baseline being used to set the manual mode or automatic mode.

Mark GELFAND et al Appl. No. 10/801,059 January 6, 2006

(ii) at col. 8 lines 35 to 45 Kitaevich et al teach that alarms are generated when limits are exceeded (see col. 8, ln. 43-46) but do not suggest that limits be determined based on a baseline measurement.

(iii) at col. 9, lns. 36 to 45 Kitaevich et al provide a general statement that parameter data is evaluated by the controller which modifies rates of infusate, filtration and blood pumping. But, there is no Kitaevich teaching that parameter data is compared to a threshold set using a baseline measurement.

Kitaevich et al would not have rendered the claimed invention to have been obvious, because Kitaevich et al do not disclose or suggest obtaining a baseline feedback signal or setting a threshold level as a function of the base line signal.

The grounds for patentability of the dependent claims further include:

- (i) Kitaevich et al do not disclose a threshold signal that is determined based on a sum of a feedback signal obtained during an initial phase of a treatment of the patient and a predetermined current feedback signal change. See claim 21
- (ii) Kitaevich et al do not disclose a control step of automatically **increasing** the reduced filtrate flow, if the feedback signal exceeds the threshold. *See* claim 25.

Mark GELFAND et al Appl. No. 10/801,059 January 6, 2006

All claims are in good condition for allowance. If any matter remains outstanding, the Examiner is requested to telephone the undersigned attorney. Prompt reconsideration and allowance of this application are requested.

Respectfully submitted,

NIXON & VANDERHYE P.C.

Bv:

Jeffry H. Nelson Reg. No. 30,481

JHN:glf 901 North Glebe Road, 11th Floor Arlington, VA 22203-1808 Telephone: (703) 816-4000

Facsimile: (703) 816-4100